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YM membership Committee

(1973-74)

10.3

Interoffice Memorandum

TO: Dr. R. Lee Clark

DATE: December 19, 1974

FROM: Murray M. Copeland, M.D.

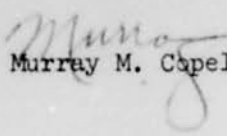
SUBJECT: Further information re December 16, 1974, meeting of the AACI Membership Committee

Dear Lee:

A report on one matter that I did not touch on in my Memorandum to the File dated December 16, 1974, re the Membership Committee: Ed Mirand presented a proposal of having each member of the AACI pay dues in the amount of \$500 per year. He polled the members of the committee as to whether their respective organizations would concur in this position. Dr. Spratt and Dr. Talbot indicated that they would endorse it. Dr. Shingleton demurred for further advice. Dr. Mirand indicated that they would endorse it. My reply was that I felt that you would endorse the dues program in the amount of \$500 per year. If you have a contrary opinion, I would appreciate your corresponding with Ed Mirand. I am sure that this will be a matter on the agenda of the meeting in Bethesda in January.

I asked for complete clarification of these dues re the UICC assessment. I understand that the dues to be considered are for support of the activities of the AACI.

Sincerely,


Murray M. Copeland, M.D.

MMC/bv

Interoffice Memorandum

TO: Dr. R. Lee Clark

DATE: December 19, 1974

FROM: Murray M. Copeland, M.D.

SUBJECT: AACI Membership Committee meeting, December 16, 1974

Dear Lee:

Please find attached my Memorandum to the File concerning the meeting of the Membership Committee of the AACI on December 16, 1974, for your information and also for that of Dr. Ed Mirand, Secretary. His official report will be forthcoming very shortly.

Sincerely,

Murray
Murray M. Copeland, M.D.

MMC/bv
Enclosure

AACI Membership Committee Meeting

December 16, 1974
9:00 a.m.

Bellevue Stratford Hotel
Philadelphia, Pennsylvania

Members Present:

Dr. Murray M. Copeland, Chairman
Dr. Timothy Talbot
Dr. William Shingleton
Dr. John Spratt, President - ex officio
Dr. Ed Mirand, Secretary - ex officio

Members Not Present:

Dr. Denman Hammond

Consultant:

Dr. Guy Newell, Deputy Director, National Cancer Institutes

December 16, 1974

MEMORANDUM TO THE FILE

Subject: Review of AACI applications for December 16, 1974, meeting

A. New application for membership in the AACI

1. Cancer Center of Hawaii, University of Hawaii

This institution maintains a large tumor registry, a computerized cooperative chemotherapy data file and information on clinical programs carried out in community hospitals and clinical research centers.

The committee on membership recommends approval as a Special Cancer Center for regular membership.

B. Applications deferred for more information; more information received

1. Clinica Oncologica "Andres Grillasca", Ponce, Puerto Rico

A review of a more detailed and complete application for membership as a Special Cancer Center was found by the committee to be satisfactory and its potential for research activities are good to become a Comprehensive Cancer Center.

The Committee recommends approval as a Special Cancer Center and for regular membership.

2. Columbia University Cancer Research Center

The Committee has reviewed the completed application of the Columbia University Cancer Research Center and finds it has excellent facilities and an excellent program and related training programs in research. It does not yet appear to have a clearly defined interdisciplinary capability in the performance of diagnosis and treatment and cancer control activities at this time. The potential for a comprehensive cancer center is great but will require a further coordination and elaboration of its potentials.

The Committee recommends approval as a Special Cancer Center for regular membership.

3. Howard University Cancer Research Center

The Committee considered carefully the status of Howard University Cancer Research Center as it stands alone and also its activities as a part of a cooperative effort with Georgetown University Medical Center which has been urged by the National Cancer Institute to ultimately develop a cooperative comprehensive cancer center with Howard University in the District of Columbia.

Further information has been furnished by Dr. Jack E. White, Director of the Howard University Cancer Research Center as to the cooperative efforts that have been made to date with Georgetown University Medical Center which would indicate that they are ready and willing to undertake such a program with Georgetown. On April 10, 1973, a meeting was held at Howard University between Dr. Jack White, Director of Howard University and Dr. Ulrich Henschke, Professor of Radiotherapy, and, on the Georgetown side, Dr. John Potter, Director, Dr. James Cox, Chief of Radiotherapy and Dr. Joseph Bellanti, Professor of Pediatrics. In addition to confirming the desirability for mutual endeavors, some specific areas for initial cooperation were visualized. These included joint utilization of major equipment facilities, especially in x-ray therapy. It was agreed to establish joint conferences, tumor boards and lectureships and to embark upon other educational endeavors. It was also felt that a cooperative venture could improve the education of the laity. They also felt it was desirable to enter upon mutually developed clinical and basic cancer research protocols. It was pointed out that brain tumors and pediatric tumors are not common among the Black population and it was felt that Georgetown could contribute toward Howard's teaching case load in this regard.

On July 9, 1974, Dr. Copeland called Dr. Coffey and advised him that the AACI had understood that Howard University and Georgetown University had been given a joint cooperative cancer center planning status and that it was hoped that Georgetown could pick up a significant research program with reference to such a cooperative effort. More recently (December 1974) Dr. Copeland talked with Dr. John Potter, Director of the Cancer Program at Georgetown, as to the status of their application to the AACI. He advised that Georgetown intended to come in with a request for membership and should have the application in before the June meeting.

Dr. Copeland felt that these two institutions might be considered as separate memberships at this time in that Howard University now seems to meet the prerequisites for a comprehensive cancer center and should be considered in that light.

The committee, after considerable exploration of the situation as it now stands with reference to both Howard University and Georgetown University, finally concluded that Howard University should be recommended for approval as a comprehensive cancer center regular membership. It is hoped that this will stimulate Georgetown University to come forward with an application in the near future for consideration as a member of the AACI. At that point, further consideration should be given to urging a joint effort with Howard University should Georgetown University Cancer Center be approved.

The Committee recommends Howard University Cancer Research Center as a Comprehensive Cancer Center for regular membership.

4. Mayo Comprehensive Cancer Center

The Committee considered the reapplication of the Mayo Clinic for membership as a Comprehensive Cancer Center.

After due deliberation the Committee recommends approval as a Comprehensive Cancer Center for regular membership.

Dr. Oliver Beahrs and Dr. David Carr are to be invited to the next meeting of the AACI, January 15-17, 1975, in Bethesda. Dr. Beahrs has asked that Dr. Carr be made the Senior Medical (Scientific) representative.

C. Applications deferred for policy decision

1. Kern Radiation Oncology Center

At the last meeting of the Membership Committee of the AACI, the Committee reported that the center was presently in the organizing stages of developing a community hospital-associated, multidisciplinary cancer center and that much of that which is contained in their planning grant application was not yet functioning, and that it was the belief of the Membership Committee that they did not qualify at that time and that perhaps it might qualify, affiliated with an appropriately recognized community cancer center.

The Membership Committee at this meeting of December 16, 1974, finds no indication that they have further corresponded with the secretary concerning their new application. The Director of the center, Dr. James F. Donovan, however, has been in considerable correspondence with the Secretary and the President concerning an Association of Community Cancer Centers. The Committee, therefore, feels that further communication should be made with the Kern Radiation Oncology Center about the resubmission of an application for membership.

2. Association of Community Cancer Centers

A considerable discussion then ensued as to the relationship of the Association of Community Cancer Centers and their role in the national cancer effort and their relationship to the AACI.

It became obvious during the discussion that the ACCC had become a "fait accompli" whose membership listing was not available to us, but that Dr. James F. Donovan, President of the Kern Radiation Oncology Center was also the President of the ACCC and that the spectrum of membership was rather broad. Of particular interest was the fact that this new association is meeting in Washington, February 1 and 2, 1975, listed as the Association of Community Cancer Centers for Community Physicians and Other Health Providers. It is stated in the "Cancer Newsletter" (See Exhibit 1) Vol. 1, No. 43, November 29, 1974, Page 4, that this meeting will be two days of hard, straight talk about the problems encountered in building a community cancer program and that they "intend to make this meeting productive ... We're holding it in Washington to give our members the opportunity to tell Congress, NCI, and other key health leaders about the vast amount of work not yet started where it really counts, at the community level - where one out of every four people will be victims of this disease."

Dr. Mirand had a copy of the proposed program which indicated that Mrs. Mary Iasker and President and Mrs. Ford would attend this meeting in some part.

Dr. Guy Newell indicated that he and Dr. Frank Rauscher would be meeting with Dr. Donovan in Bethesda in the next few days to discuss their

program and the problems of the ACCC.

The Committee was requested by Dr. Spratt, President of the AACI, to make a recommendation as to the course of action that might be taken to establish an effective liaison with the ACCC.

After due discussion, the Committee made the following motion:

The Committee endorses the following actions to be taken by the President of the AACI

- a. that the President continue general communication with the President of the ACCC
- b. that the President ^{call} pole the Board of Directors of the AACI to obtain endorsements for establishing a representative liaison with the ACCC by the AACI.

It was pointed out by Dr. Mirand that the agenda of the AACI business meeting in January 1975, include the item "The Implications of the ACCC," to be discussed by Dr. Clark.

3. University of Wisconsin Center, Health Sciences, Wisconsin Clinical Cancer Center-McArdle Laboratories for Cancer Research

The Committee reviewed the current reapplication of the Wisconsin Clinical Cancer Center-McArdle Laboratories for Cancer Research. Considerable discussion was held concerning the line of authority which existed tying the two organizations together as indicated in the title. It would appear that the Vice Chancellor for Health Sciences at Wisconsin has the key to this inherent in this reapplication. There is still evidence that McArdle Laboratories, by and large, is an autonomous group with no inclination to have a common authority for funds, and the question is how much correlation of other activities is envisioned by them with the Wisconsin Cancer Center.

It was agreed that the parties to the new application listed as a comprehensive cancer center requires further clarification. The Committee was not entirely certain as to who is the liaison officer and/or the Director of the joint Wisconsin Comprehensive Cancer Center and the McArdle Laboratories for Cancer Research or as to who has the final authority on personnel appointments or final authority on matters of financial budget. One does not get the impression from the grant request that there is a director of the joint operation unless it would be the Vice Chancellor for Health Sciences of the University of Wisconsin and/or the Dean of the School of Medicine.

The Committee agreed that this new organization would be acceptable as a comprehensive cancer center providing the points in question raised above were answered appropriately and recommends approval of the University of Wisconsin Health Sciences, Wisconsin Clinical Cancer Center-McArdle Laboratories for Cancer Research contingent upon satisfactory answers as to the lines of authority for organizational arrangements, personnel appointments, and for financing and other cooperative efforts.

D. Application for membership refused

1. Division of Biomedical and Environmental Research, U.S. Atomic Energy Commission

It was agreed that a further letter should be written to Dr. James L. Liverman who is now Director of the Atomic Energy Commission to make sure that he understands the AACI position on the refusal of accepting the Atomic Energy Commission application for a membership and that again we would be pleased to have him visit us as an interested observer as he sees fit. The secretary was asked to write such a letter.

E. Application for membership suspended

1. Cancer Research Institute, University of California, San Francisco

The Membership Committee took note of a letter recently sent to Dr. Julius Krevans, Dean of the Medical School and Acting Director of the Cancer Research Institute at the University of California, San Francisco, in which he was advised that it was the Committee's understanding that since Dr. David Wood's retirement the Cancer Research Institute has changed in its characteristics to the point that its qualifications, as a full member of the AACI, have been questioned and he was urged to reapply for membership in the AACI which would give him an opportunity to detail the activities of his organization for review by the AACI Membership Committee. An application form was sent him.

The Committee notes that we have not heard from Dr. Krevans since that time, and the secretary was directed to send him a letter indicating this, and he be urged to submit a reapplication at his early convenience if his program is now well organized and effective.

(Further to the record: After the meeting of the Membership Committee, on December 17, 1974, Dr. Copeland received a call from Dr. Guy Newell who had just had a call from Dr. Monty Apple, an associate of Dr. Krevans, who is at the University of California. He advised that they were prepared to send in another application for membership and noted that Dr. Steven Shoet, a hematologist, had been made Director of the Cancer Center at the University of California, San Francisco, and that the northern California cancer group had developed a cooperative type of arrangement for developing a cancer program and wondered whether or not these various actions would in any way detract from the University of California Cancer Center putting in, for a comprehensive cancer center. Dr. Newell informed him that he thought it would be premature to put in for a new membership at this time. He felt that the new director should be allowed to reorganize his program, identify its various facets and implement them, and then an appropriate application could be made. This would not be possible before the next meeting of the AACI in January of 1975. Dr. Newell then asked him who would be involved in the northern California cooperative effort. He identified:

1. Stanford University
2. University of California at Berkeley
3. The West Coast Cancer Foundation at San Francisco
4. The University of California Cancer Center at San Francisco

At the meeting of the Membership Committee the question of the West Coast Cancer Center Foundation status was brought up in connection with their membership in the ACCC. On inquiry Dr. Apple stated that the West Coast Cancer Foundation was made up of alumni of the University of California and Stanford among others, and he felt that it was a good and viable organization.

I talked with Dr. Mirand at the Holiday Inn on December 17, 1974, and advised him to call me after he had discussed the Kern Institute, the ACCC and the University of California Cancer Center at San Francisco with Dr. Newell and in the meantime hold in abeyance letters which he had prepared for the Committee to send to Dr. Donovan and to Dr. Krevans per request.)

F. Institutes replied to update membership

1. International Agency for Research on Cancer

The Committee, after reviewing the response by the Director of the International Agency for Research on Cancer and the facts available, reaffirmed the International Agency for Research on Cancer, status of corresponding membership. It was noted that it has a strong program in

1. International collaboration in cancer research;
2. Provisions for planning and promoting research in all phases of the causation, treatment, and prevention of cancer. Its limited objectives are notable in epidemiology and in environmental carcinogenesis.

2. National Cancer Institute

The Committee, after reviewing the *reaffirmation request* reapplication of the National Cancer Institute, reaffirmed enthusiastically the National Cancer Institute as a Comprehensive Cancer Center and for regular membership.

G. Institutes which have not replied to request for update of organization

1. Eppley Institute for Research in Cancer

The Committee felt that Dr. Philippe Shubik should receive another letter indicating the deficiency of not updating his status and the importance of his organization applying for reaffirmation of membership with appropriate information. It was decided that certain members of the committee would write Dr. Shubik along this line. Dr. Mirand has a record of the suggestions.

2. Southern Research Institute

The Committee felt that Dr. Howard E. Skipper should receive another letter indicating the deficiency of not updating his status and the importance of his organization applying for reaffirmation of membership with appropriate information. It was decided that certain members of the committee would write Dr. Skipper along this line. Dr. Mirand has a record of the suggestions.

H. Institutes indicating interest in the AACI

1. Colorado Regional Cancer Center

The Committee indicated that the secretary should write appropriate authorities at the Colorado Regional Cancer Center indicating that the Membership Committee would be glad to receive a request for membership when they are prepared to send it in and indicating that the application would be subject to peer review.

I. Letters to organizations who have not returned completed applications

1. Cancer Research Center, Boston University

Dr. Mirand reported that this group are in the process of getting an application in. The secretary was advised to write Dr. Fitzroy Kennedy, Administrative Assistant to the Cancer Research Center coordinating committee and request a report on the status of their application for membership.

2. Oklahoma Medical Research Foundation

The Committee was appraised of the fact that the Oklahoma Medical Research Foundation, Dr. Clayton S. White, President, had not responded to the letter of October 7, 1974, in which an application for membership in the AACI was sent to him. The secretary was advised to write Dr. White and request the status of their application for membership.

3. Tufts Cancer Research Center

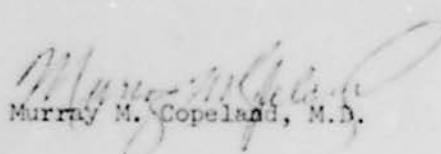
The Membership Committee noted that there had been no further correspondence from Dr. William Fishman, Director, after two letters of inquiry and felt that another letter should be sent indicating that it would be the last letter inquiring as to the status of the application.

Dr. Mirand then submitted correspondence received from the Cancer Research Institute, Inc. in New York City brought about by soliciting a letter of interest from that organization as to whether they would like to be members of the AACI. In the correspondence from Mrs. Helen C. Nauts, Executive Director, it became apparent that they did not maintain a hospital or diagnostic clinics, or laboratories of their own and, therefore, they do not fall into any recognized category to become a member of the AACI. The secretary was instructed to write Mrs. Nauts that such was the case and that the organization was not eligible for membership.

Dr. Mirand then submitted a list of names with organizations who have requested information concerning membership in the AACI and to whom an application and by-laws have been sent. The Committee endorsed the actions taken and indicated that appropriate members of the committee were to write some of the individuals concerned. I was asked to write Dr. Lester Breslow and Dr. Joe Ross concerning the UCLA Cancer Center which has some interest in the AACI.

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Dr. Mirand ~~was~~ to check on the Mid-America Cancer Center and its potential so that this information will be available if and when the applications are received. The Frederick Cancer Research Center at Oak Ridge, Tennessee, will be further urged to send in an application for membership.

These minutes do not represent the official minutes, but are notes prepared by me as Chairman of the Membership Committee of the AACI for information to Dr. Ed Mirand, Secretary, and Dr. R. Lee Clark, M. D. Anderson Hospital and Tumor Institute, whom I represent in the organization of the AACI.


Murray M. Copeland, M.D.

MMC/bv

ACCC PLANS "STRAIGHT TALK" MEETING IN D.C. ON COMMUNITY CANCER PROGRAMS

"Developing a Community Cancer Program" will be the topic of a meeting in Washington Feb. 1 and 2 sponsored by the Assn. of Community Cancer Centers for community physicians and other health providers.

"This meeting will be two days of hard, straight talk about the problems encountered in building a community cancer program and how, working together, we can solve some of these problems," said James Donovan, ACCC president.

The meeting includes six workshops for participants:

- Cancer care in your community - is it good enough?
- Money for cancer programs - where is it?
- Building your community cancer program - can you get help?
- Does your hospital understand quality cancer care - why not?
- Does your tumor registry help you - why not?
- Can a comprehensive center help you - how?

"We intend to make this meeting productive," said Donovan. "We're holding it in Washington to give our members the opportunity to tell Congress, NCI and other key health leaders about the vast amount of work not yet started where it really counts, at the community level-where one out of every four people will be victims of this disease."

Donovan said this meeting, like ACCC's other efforts, was aimed at helping the formation of these programs through self-efforts. He said that community cancer programs cannot count on total assistance from federal government sources and must be built on that premise.

"The meeting is just the first of several major efforts by the association to provide open, continuing two-way communications for individuals involved in community cancer care," Donovan said. "Other efforts will include the development of an ongoing assistance program to new and established community cancer groups and programs, and a mechanism for insuring rapid translation of new technology and a form useful in community care."

"Our program is designed to give the individual who sees a need for a cancer program in his or her community the opportunity to discuss the experiences and problems others have had in trying to develop a community program. We will try to provide new programs with as much direct assistance as the association can afford. Right now we are the only source they can turn to," said Donovan.

Registration forms for the meeting may be obtained by writing to ACCC, P.O. Box 30279, Bethesda, Md. 20014, or by calling ACCC executive secretary, Lee Mortenson at 301-656-3987. The meeting will be held at the Key Bridge Marriott hotel.

NCAB GIVES PRESIDENT FORD EVIDENCE BACKING LIMITS ON TAR AND NICOTINE

President Ford now has in his possession what NCI staff members and the National Cancer Advisory Board feel are sufficient scientific references to support an effort to obtain legislative authority for regulation of tar and nicotine content of cigarettes.

Ford had asked NCAB Chairman Jonathan Rhoads to furnish him with the scientific evidence backing up the Board's earlier request that a federal agency be given regulatory power over cigarettes. Such power is now specifically denied to FDA and the Consumer Product Safety Commission, the most likely agencies to undertake such regulation.

The Board approved a statement citing numerous studies which link cigarette smoking to lung cancer and to other cancers and respiratory and cardiovascular diseases.

The statement was accompanied by a reference appendix listing specific studies. The appendix noted that "the scientific literature in smoking and health cannot be reported here in detail, because of its vastness. This document offers guidance to selected publications giving critical analysis of the scientific literature, prominent among which are the annual reports to Congress by the United States Surgeon General on the health consequences of smoking, as compiled by the National Clearinghouse for Smoking and Health."

"The additional listing of specific scientific references does not imply that other studies are less important or valid, but simply offers selected examples."

"Some of the latest information on consumer statistics and trends in disease incidence is still unpublished, but it can be described and defended by expert witnesses should hearings become necessary."

It is unlikely that even with the President's all-out support Congress would pass a bill permitting the enforcement of tar and nicotine limits. The tobacco industry is adamant in its opposition, and tobacco-state congressmen and senators have effectively blocked most efforts in the past opposed by the industry.

The Board recognized this and suggested another move the President could make: a personal appeal to the industry to step up the process it has been carrying out voluntarily over the last 20 years in reducing tar and nicotine content.

"The next step is up to the President, to decide whether or not to ask Congress for the necessary legislation," Rhoads commented.

"He's been sitting over there (in Congress) for 28 years listening to some very vocal congressmen say we haven't got the evidence," Panel Chairman Benno Schmidt said. "He's asked us for that evidence."

The statement approved by the Board (but not the appendix) follows:

file
10.3

Interoffice Memorandum

TO: Dr. R. Lee Clark

DATE: December 3, 1974

FROM: Murray M. Copeland, M.D.

SUBJECT: AACI Membership Committee meeting, December 16, 1974

Dear Lee:

Please find attached a copy of the agenda for the December 16 meeting of the Membership Committee of the AACI. This meeting will be held at the Bellevue Stratford in Philadelphia at 9 a.m. We have arranged overnight accommodations for \$22.50 at this hotel and will be pleased to make a reservation for you if you can possibly come. I would appreciate your presence.

Very sincerely,

Murray
Murray M. Copeland, M.D.

MMC/bv

Enclosure

P.S. I have a set of the documents if you would like to have a copy. We will

Xerox it for you.

MMC

** Rpt. RLC said it was not possible for him to attend as it was necessary to meet with Mrs. Saunders. Several other people discussed the above meeting with Dr. M. Copeland who said they could handle it. I told MMC's office we will not go on 16th.*

A G E N D A

- A. New Applications for Membership in the AACI
 - 1. Cancer Center of Hawaii, University of Hawaii
- B. Applications deferred for more information - have received more information
 - 1. Howard University Cancer Research Center and Georgetown University
 - 2. Clinica Oncologica "Andes Grillasca"
 - 3. Mayo Foundation
 - 4. Cancer Research Center, Columbia University Faculty of Medicine
- C. Applications deferred for policy decision
 - 1. Kern Radiation Oncology Center
 - 2. Association of Community Cancer Centers
 - 3. Wisconsin Clinical Cancer Center and McArdle Laboratories
(advised to re-submit for single membership - new application received)
- D. Application for membership refused
 - 1. Division of Biomedical & Environmental Research (DBER)
U.S. Atomic Energy Commission
- E. Application for membership suspended
 - 1. Cancer Research Institute - with invitation to re-submit
- F. Institutions replying to update of membership
 - 1. National Cancer Institute
 - 2. International Agency for Research on Cancer - corresponding members
- G. Institutions which have not replied to request for updating organization
 - 1. Eppler Institute for Research in Cancer
 - 2. Southern Research Institute

A G E N D A (cont.)

H. Institutions indicating interest in AACI with letter stating such

1. Colorado Regional Cancer Center

I. Letters to organizations who have not returned a completed application

1. Cancer Research Center Coordinating Committee, Boston University Medical Center
2. Oklahoma Medical Research Foundation
3. Tufts Cancer Research Center

MEMBERSHIP APPLICATION
ASSOCIATION OF AMERICAN CANCER INSTITUTES

INSTRUCTIONS

1. The original and 5 copies of the completed Membership Application should be submitted to:

Dr. Edwin Mirand
Secretary-Treasurer of the American Association of Cancer Institutes
666 Elm Street
Roswell Park Memorial Institute
Buffalo, New York 14203

2. Questions pertaining to the application should be addressed to the Secretary-Treasurer.
3. Applicants may append additional pages to the application form if space is needed to provide complete answers to questions. But applicants are kindly requested NOT to provide extensive supplementary information. If the AACI requires additional data for a full evaluation of the applicant, it will be requested.
4. This application blank includes items both for Comprehensive and Special Centers. In the case of Special Centers many items may not be germane to the applicant's organization. It is requested that as many items as possible be completed designating those that the applicant considers not germane as "not applicable" (N/A).

Qualifications for Membership

5. The provisions for Regular Membership are outlined for your information and include the following qualifications as prescribed by the By-Laws. (There is no provision for Associate Membership).
 - a. Regular Membership of the American Association for Cancer Institutes shall include only those institutions and/or organizations within the United States which shall be designated as Comprehensive or Special Cancer Centers and have coordinated interdisciplinary programs such as:
 - (1) (Comprehensive) Cancer Institutes and/or centers which include a wide variety of clinical disciplines related to patient care, a broad range of research and training programs which include clinical and biologic sciences, (genetics, carcinogenesis, virology, immunology, cytokinetics, biomathematics, medical pharmacology, developmental therapeutics, radiation biology, surgery, animal models, etc.).
 - (2) (Special Cancer Center, which is) a major component of an organization or institution (i.e. of a medical school, university, division of industrial organization, etc.) which will permit emphasis on manpower largely engaged in a broad spectrum of cancer research and training.

INSTRUCTIONS

(3) (Special Cancer Center which is) an institution within the United States not related to a medical school, university, division of industrial organization, etc. but which place emphasis on the manpower largely engaged on a spectrum of clinical activities which serve as focal points for development and training and/or research providing quality care for cancer patients. These clinical activities must also provide education, training and/or research with clinical application for a regional area which is sparsely populated.

(4) Federal agencies with major cancer oriented programs as noted Section 2a(1) or 2a(2) above will be invited to participate in the activities of the Association.

Pedagogical mechanism must obtain in the categories above where applicable which will permit greater emphasis on recruitment of graduate and post-graduate students into basic or clinical cancer research. (and which will provide cooperative programs with the local medical profession, hospitals, etc.)

(5) Each Regular Member institution, organization, or agency is authorized to appoint up to three representatives, one of whom must be the Senior Scientific Director

b. Corresponding Membership may be held by selected cancer institutes and centers or other organizations outside the United States with a major component devoted to cancer activities, and should be represented by the Senior Scientific Head in each instance.

6. The term "institute" as used in the application refers to any organizational pattern identified under Qualifications for Membership.

1. Name and address of Applicant Institute

2. Category of membership being applied for. (See Instruction Sheet #5a and b).

_____ Comprehensive
_____ Special
_____ Corresponding

3. Summarize purpose (objectives) of institute or organization.

4. ORGANIZATION

Is the applicant institute an element of a larger organization, such as a university, hospital, research center, etc. _____ no _____ yes Specify: _____

4.1 Provide an organization chart of the applicant institute

4.2 Provide the following information on personnel as follows:

PERSONNEL

Professional:

	<u>MD</u>	<u>PhD</u>	<u>DDS</u>	<u>MD/PhD</u>	<u>MD/DDS</u>	<u>DVM</u>	<u>DVM/PhD</u>	<u>TOTAL</u>
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Full-time

Part-time

Volunteer

Consultants

Total number of technicians employed by the institution _____.

Total Personnel - All Categories _____.

4.3 Accrediting Agencies, if any. Please list: _____

4.4 To whom does the head of the applicant institute report?

4.5 Who appoints the head of the applicant institute? _____

4.6 Who has review authority over the appointment? _____

4.7 Who has approval authority? _____

4.

Head of applicant institute:

- .1 Does he have final authority to establish the internal organization of the institute? _____ yes _____ no If no, who has approval authority?

_____ May the approving authority change the institute's organizational structure? _____ yes _____ no

If yes, explain conditions _____

Could changes be made over the objections of the head of the applicant institute? _____ yes _____ no

- .2 Does he have final authority to appoint key medical, scientific, and management personnel? _____ yes _____ no

If no, who has approval authority? _____

Can the approving authority make personnel appointments? _____ no _____ yes

- 5.1 Who coordinates the preparation of the institute's budget? _____

- 5.2 What is the prime source of the institute's budget? _____
Percent of the total budget? _____ % The secondary source? _____
_____ Percent of the total budget? _____ %
- 5.3 How much is the institute's total budget for fiscal year 1973? \$ _____
Fiscal year 1974? \$ _____ (estimated/actual)
- 5.4 To whom is the budget submitted? _____

- 5.5 Who reviews the budget submittal? _____

- 5.6 Who has approval authority over the budget submittal? _____

- 5.7 Is the approval authority authorized to modify the budget submittal? _____ no _____ yes
If yes, which approval authority(s)? _____

- 5.8 If the total budget submittal is not appropriated by the funding agency, does the head of the institute have final authority as to how the available funds will be allocated within the organizational structure of the institute? _____ yes _____ no
If no, who does? _____

RESEARCH

6.1 Basic Science

.1 Use the form on the next page to provide the following information:

- . List of basic science departments conducting research (Physics, Chemistry, Biomathematics, Biology, etc.)
- . The number of medical and scientific personnel in each department (M.D., Ph.D., etc.)
- . The number of technicians in each department
- . Indicate to whom each department reports
- . Total budget for each department (Fy 1973)
- . Total number of active projects in each department

.2 For each department, list the principal projects being conducted. (Use separate sheets). Give only title of the project and its objective.

.3 Within the institute, who reviews proposed basic science research projects?

.4 Within the institute, who has final approval/disapproval authority of proposed basic science research projects? _____

.5 Does the institute have a specific procedure for evaluating on-going or completed basic science research projects? _____ no _____ yes If yes, outline.

BASIC SCIENCE DEPARTMENT	PERSONNEL		No. of Projects	1973 Budget	To Whom Department Head Reports
	Professional	Technicians			

DepartmentSq. Ft.6.2 Clinical Research

.1 Use the form on the next page to provide the following information:

- . List of Clinical Departments conducting research (Surgery, Medicine, Pathology, Gynecology, Pediatrics, etc.)
- . The number of physicians personnel in each department
- . The number of technicians in each department
- . Indicate to whom each department reports
- . Total budget for each department (FY 1973)
- . Total number of active research projects in each department

.2 For each department, list the principal projects being conducted. (Use separate sheets). Give only title of the project and its objective.

.3 Within the institute, who reviews proposed clinical research projects?

.4 Within the institute, who has final approval/disapproval authority of proposed clinical research projects?

.5 Does the institute have a specific procedure for evaluating on-going or completed clinical research projects? no yes. If yes, outline.

6.

- .6 Does the institute have a statistical base for evaluation of results of its program activities, such as records which standardize disease classification to enable exchange of information between institutions. Briefly discuss.

- .7 What is the total square feet of space allocated to each Clinical department?

Department

Sq. Ft.

CLINICAL
DEPARTMENT

PERSONNEL

Professionals

Technicians

No. of
Projects

1973
Budget

To Whom Department Head Reports

7.1 How many hospital beds are devoted to inpatient care? _____

7.2 Complete the following table

<u>ACTUAL</u>	<u>ESTIMATED</u>
<u>CY 1972</u>	<u>CY 1973</u>

- . Patients Seen
- . New Patients Registered
- . Outpatient Visits
- . Hospital Patient Days
- . Surgical Procedures
- . X-ray Therapy - Lesions Treated
- . X-ray Therapy - Areas Treated

7.3 List each clinical discipline providing patient care and the number of medical doctors in each discipline.

Clinical Discipline

Number of M.D.

7.4 To whom do the heads of clinical departments report? _____

7.5 What is the budget for patient care? \$ _____ FY 197_ \$ _____ FY 197_ est.

7.6 What is the total square feet of space allocated to outpatient care? _____ sq. ft.

EDUCATION

8.1 Does the institute have a formal, documented education policy? _____no _____yes
If yes, please provide a copy.

8.2 Indicate the training programs being conducted within the direction and control of the institute. Use the following check list and show the number enrolled.

<u>Check</u>	<u>Program</u>	<u>No. in</u> <u>1972</u>	<u>Est. in</u> <u>1973</u>
--------------	----------------	------------------------------	-------------------------------

_____ Predoctoral Fellows enrolled in Ph.D programs

_____ Predoctoral Fellows and Trainees (Special) not
enrolled in Ph.D. programs

_____ Postdoctoral Fellows and Project Investigators
in basic research areas

_____ Postdoctoral Fellows and Project Investigators
in clinical research areas

_____ Clinical Fellows and Project Investigators

_____ Clinical Residents (including dental services)

_____ Observers, Visiting Scientists

_____ Postdoctoral Fellows and Project Investigators in
both clinical and basic research areas simultaneously

8.3 Does the institute have an Office of Education (or other title) functioning as a
distinct organizational element? _____no _____yes If yes, does the office
have a full time or part time director? _____full _____part. If part time, how
many hours per week? _____hrs/week

8.4 Does the institute have autonomy in determining all aspects of its education program,
such as the areas in which education programs will be planned and conducted, the
curricula, etc.? _____yes _____no. If no, who has review privileges?

Who has approval authority? _____

8.5 Can any part of the education program be imposed by anyone outside the institute?
_____no _____yes. If yes, specify? _____

CANCER CONTROL

9.1 Does the institute have any kind of cooperative program with the local medical profession? _____no _____yes. If yes, describe

9.2 What organizational element has responsibility for cancer control planning and implementation?

10.2 Patient Care

10.4 Cancer Control

Association of American Cancer Institutes

10.7
John S. Spratt, Jr., President
Cancer Research Center, Columbia, Missouri 65201
Edwin A. Mirand, Secretary-Treasurer
Roswell Park Memorial Institute, Buffalo, N.Y. 14203

24 July 1974

Murray M. Copeland, M.D.
Vice President
University Cancer Foundation
The University of Texas
M. D. Anderson Hospital and Tumor Institute
Houston, Texas 77025

Dear Murray:

Bill Hutchinson called me regarding the AACI policy with respect to the affiliate memberships and their relation to existing comprehensive centers. I suggested that each applicant for affiliate membership exchange letters of agreement with a comprehensive center.

Generally, this would be with the nearest comprehensive center, though exceptions might exist. These letters should be appended to the application of the affiliate member.

This is an interim decision which I would like the membership committee to review. Your review is requested to recommend a policy for adoption by the AACI.

With best regards.

Sincerely,

John S. Spratt, Jr., M.D.
President

cc: R. Lee Clark, M.D.
Edwin A. Mirand, Ph.D.
William B. Hutchinson, M.D.
Guy R. Newell, M.D.

Association of American Cancer Institutes

10.3
John S. Spratt, Jr., President
Cancer Research Center, Columbia, Missouri 65201
Edwin A. Mirand, Secretary-Treasurer
Roswell Park Memorial Institute, Buffalo, N.Y. 14203

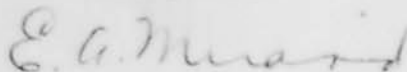
July 18, 1974

Dr. R. Lee Clark, President
The University of Texas System Cancer Center
M. D. Anderson Hospital and Tumor Institute
Texas Medical Center
Houston, Texas 77025

Dear Dr. Clark:

At the AACI Membership Committee meeting on June 25, we reviewed the information from your Institute updating your current membership status in the Association. We acknowledge receipt of this information, and the Membership Committee has instructed me to advise you of their appreciation in having this information which supports your continuous full membership in the AACI.

Sincerely yours,



E. A. Mirand
Secretary-Treasurer, AACI;
Associate Institute Director
and Professor, R.P.M.I.

EAM:co

cc: Dr. M. Copeland

10.3
MEMBERSHIP LIST

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Dr. George E. Foley
Associate Director for Laboratories
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Duke University Medical Center
Durham, North Carolina 27710

Dr. Wm. W. Shingleton
(Ph.: 919, 684-8111)

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Seattle, Washington 98104

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(Alternate: C. Chester Stock, Ph.D.)

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Chief Medical Officer
(Alternate: Dr. Alvin Freiman)

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Dr. Marvin A. Rich
Director, Biological Sciences

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*Status has been changed but reaffirmation application has not been filed properly
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Dr. Bayard H. Morrison, III
Assistant Director
(Ph.: 301, 496-3301)

Dr. John R. Totter, Associate Director
for Biomedical and Environmental Sciences
P. O. Box X
(Ph.: 615, 483-8611)

Dr. Francis T. Kenney
Biology Division
P. O. Box Y

Dr. N. G. Anderson
Biomedical and Environmental Sciences
P. O. Box X

Institute

Roswell Park Memorial Institute
New York State Department of Health
666 Elm Street
Buffalo, New York 14203

*Sloan-Kettering Institute for Cancer Research
444 E. 68th Street
New York, New York 10021

Southern Research Institute
Kettering-Meyer Laboratory
2000 Ninth Avenue South
Birmingham, Alabama 35205

St. Jude Children's Research Hospital
332 North Lauderdale Street
Box 318
Memphis, Tennessee 38101

University of Alabama in Birmingham
Cancer Research and Training Program
University Station
Birmingham, Alabama 35294

University of Chicago Cancer Research Center
950 E. 59th Street
Chicago, Illinois 60637

Representatives

Dr. Gerald P. Murphy, Director
(Ph.: 716, 845-5770)

Dr. Edwin A. Mirand
Associate Institute Director
(Ph.: 716, 845-3095)

Mr. Robert W. Goehle
Fiscal Administrator
(Ph.: 716, 845-3033)

Dr. Robert A. Good
(Ph.: 212, 879-3000)

Dr. Lloyd J. Old

Dr. Leo Wade

Dr. Howard E. Skipper
Vice-President and Director
(Ph.: 205, 323-6592)

Dr. Frank M. Schabel, Jr.
Director, Chemotherapy Research

Dr. Alvin M. Mauer, Medical Director
Mr. Carl B. Simmons, Administrator
(Ph.: 901, 525-8381)

Dr. Allan Granoff

Dr. John R. Durant, Director
(Ph.: 205, 934-5077)

Dr. John E. Ultmann, Director
(Ph.: 312, 947-5017)

Dr. Alexander Gottschalk
(Ph.: 312, 947-5007)

*Status has been changed but reaffirmation application has not been filed properly
with the AACI Membership Committee

Institute

Representatives

The University of Texas
M. D. Anderson Hospital and Tumor Institute
Houston, Texas 77025

Dr. R. Lee Clark, President
University of Texas System Cancer Center
(PH.: 713, 792-2121)

Dr. Robert C. Hickey, Director

Dr. Murray M. Copeland, Vice-President
University Cancer Foundation
(Ph.: 713, 792-3025)

University of Wisconsin Medical Center
1300 University Avenue
Madison, Wisconsin 53706

Dr. Robert O. Johnson, Director
Division of Clinical Oncology
709C University Hospitals
(Ph.: 608, 262-1626)

Dr. Harold P. Rusch
(Ph.: 608, 262-3850 or 262-1686)

CORRESPONDING MEMBERSHIP

International Agency for Research on Cancer
World Health Organization
150, Cours Albert Thomas
69008 Lyon, France

Dr. John Higginson, Director

10.3



THE UNIVERSITY OF TEXAS AT HOUSTON
M. D. ANDERSON HOSPITAL AND TUMOR INSTITUTE

Texas Medical Center

Houston, Texas

77025

December 28, 1973

OFFICE OF THE PRESIDENT

Dr. Timothy Talbot, President
The Institute for Cancer Research
7701 Burholme Avenue
Philadelphia, Pennsylvania 19111

Dear Tim:

The minutes of the AACI Membership Committee Meeting held on December 15, 1973, which we discussed on the telephone, have been changed as follows: The last line in paragraph 2 will read "for cancer centers consonant with the concept, hopefully to be adopted by the membership of the AACI."

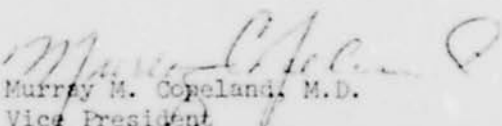
I have also talked with Dr. Mirand regarding the visual aids for your presentation. He is in contact with Dr. Llobet daily by telephone and will advise him that you will use 2" X 2" slides and will also need a projector.

Dr. Mirand will prepare enough copies of the minutes of the Membership Committee Meeting to distribute to the membership at San Juan.

He has also notified all the appropriate candidates of their status listed under "Applications held over - New information received", see page 4 of the minutes.

Looking forward to seeing you.

Cordially yours,


Murray M. Copeland, M.D.
Vice President
University Cancer Foundation

MMC:jr

c: Dr. R. Lee Clark
Dr. Edwin Mirand
Mrs. B.J. Kolenda

for P.R.

Interoffice Memorandum

TO: Dr. R. Lee Clark

DATE: December 20, 1973

FROM:

SUBJECT:

Dear Lee:

Please find attached minutes of the AACI Membership Committee Meeting and my note to Ed Mirand. I am not quite sure what should be done with reference to the minutes of the second day's meeting. I presume you will send them to Doctor Mirand - when approved by you.

Very sincerely,

Murray
Murray M. Copeland, M.D.

MMC/wg

Enclosures 2

1/4/74 - Cy in trip folder

W. D. ANDERSON HOSPITAL
RECEIVED
OFFICE OF THE DIRECTOR
DEC 27 1973
THE UNIVERSITY OF TEXAS

AACI Membership Committee Meeting
The Anderson Mayfair
Houston, Texas

December 15, 1973

Members present: Dr. Murray M. Copeland, Chairman
 Dr. Robert Johnson
 Dr. Edwin Mirand
 Dr. William Hutchinson
 Dr. John Spratt, President-elect
 Dr. Timothy Talbot, ex officio

Members absent: Dr. Phillip Shubik

Doctor Copeland opened the meeting by reading a letter to Doctor Mirand from Doctor Murphy (Exhibit I).

With reference to the urgency of inviting all cancer centers activated by the National Cancer Institute to become members of the American Association of Cancer Institutes, Doctor Mirand stated that the Mayo Clinic has been invited to submit an application for membership but he has not received any response from them.

With reference to the Mountain States Tumor Institute, it was pointed out that with the revision of the By-Laws, Page 3, Article III, Section 2a (3), when approved, the Institute will be approved.

A motion was then made and seconded recommending to the By-Laws Committee that the above paragraph revision under advisement should be further revised by striking out the last four words "which is sparsely populated." Dr. John Spratt, Chairman of the By-Laws Committee, was present and was officially notified re the recommended revision. It was reaffirmed that the Mountain States Tumor Institute was recommended for approval as a Special Cancer Center provided the By-Law, Page 3, Article III, Section 2a (3) was successfully amended at the AACI meeting in January of 1974, having been previously reviewed by the Membership Committee with this in mind.

With reference to the Bakersfield satellite arrangement connected with the University of Southern California, the Committee felt this arrangement was beyond their purview for action, unless a proposal is submitted by the University of Southern California.

The Committee then discussed the membership status of twelve Comprehensive Cancer Centers now extant. It was pointed out that four of the twelve are already members of the American Association of Cancer Institutes. They are as follows: M. D. Anderson Hospital and Tumor Institute, Roswell Park Memorial Institute, Memorial Sloan-Kettering Cancer Center, and The National Cancer Institute.

December 15, 1973

Doctor Talbot cited the following institutions which also have been designated by The NCI as cancer centers:

Cancer Research and Training Program, University of Alabama

Cancer Research Center of Greater Miami, University of Miami Medical School

Duke Comprehensive Cancer Center, Duke University Medical Center

Children's Cancer Research Foundation, Boston

Johns Hopkins Medical Institutions, Baltimore

The Fred Hutchinson Cancer Research Center, University of Washington

University of Southern California Cancer Center

Wisconsin Clinical Cancer Center, University of Wisconsin

Mayo Clinic

The Committee then discussed the need for consideration of the types of membership which would more easily encompass some of the institutions designated as cancer centers by The NCI. Doctor Talbot suggested that the Committee find some mechanism for introducing another definition of "center" into the system in terms of "Co-ordinated Cancer Center," with the objective in mind that the National Cancer Institute be invited to embrace this concept in their definition and guidelines for cancer consonant with the concept, hopefully to be adopted by the membership of AACI.

It was felt that the concept of a Coordinated Cancer Center could be incorporated into the By-Laws and given greater cognizance. The definition of a Coordinated Cancer Center recommended, is as follows: "The term 'Coordinated Cancer Center' shall apply to those organizations which can demonstrate that within their organizational structure they have a cancer program involved with, but not limited to, any two of the program components, consisting of cancer research (both basic and applied), cancer treatment, cancer education and training, and cancer preventive public health."

The guidelines for such a center include:

- "a. A Coordinated Cancer Center should provide an organizational plan of operation that brings together researchers, clinicians, teachers, and administrators for the purpose of coordinating cancer-related activities.

December 15, 1973

"b. A Coordinated Cancer Center should be recognized as a major function within the organizational structure of the parent institution. It should have a credible organization plan for the administration and efficient operation of the cancer center. The salient features of such an organization should include the following criteria as minimal requirements:

- 1) A qualified person on a full- or part-time basis to function as Director of the Coordinated Cancer Program.
- 2) Physical facilities, preferably centralized as much as possible, to promote collaboration among the constituent programs.
- 3) Sufficient full-time staff, space, and facilities to ensure successful operation of the center, both scientifically and administratively.
- 4) A Scientific Advisory Committee to ensure adequate in-house review of the entire program."

Doctor Talbot urged that if the concept is approved, it be submitted to The National Cancer Institute for information and suggested adoption.

A motion was then made to recommend to the By-Laws Committee that either a fifth class of membership to the AACI be provided or that possibly the identity of a Coordinated Cancer Center be written into one of the classes presently in the By-Laws. The motion was adopted unanimously.

Doctor Talbot further suggested that Doctor Putney be asked to present this view at the next meeting of the AACI, January 9-11, 1974, Puerto Rico.

The Committee further recommended to the By-Laws Committee that a change be made in the By-Laws, Article III, Section 2a (1), as follows:

Following "Comprehensive" the words "and/or Coordinated" be added to the beginning of paragraph Section 2a (1), to read:

"Comprehensive and/or Coordinated Cancer Institutes or Centers which include a wide variety, etc."

The Committee then discussed the flexibility of membership. The desperate need to broaden our membership as a goal was pointed out. It was recommended that Article III, Section 2 - "Qualifications for Membership" be amended to provide a vehicle for carrying out this concept. There were certain problems cited which must be solved, i.e. having membership in the same geographic area and under the

December 15, 1973

same administrative authority. We have Article III, Section 2 recommended as amended, providing an adequate vehicle for consideration of various types of cancer centers. We have not yet come to grips with some of the questions of institutes or centers applying within the same administrative authority.

After considerable discussion, it was the feeling of the Committee that various cancer activities under a unified administrative authority, should be considered as a geographical area to be represented by only one membership. The Committee unanimously recommended to the By-Laws Committee that this concept be introduced into the Constitution.

In changing the Constitution and By-Laws, the retaining of the current membership is envisioned as outlined in the original membership document approved December 12, 1972. It is the hope of the Committee, however, that even institutions with existing membership will take steps to coordinate their joint efforts with other effective organizations within the same chain of authority.

The Committee felt that the Constitution and By-Laws, with currently recommended amendments, should prevail over previously enacted By-Laws.

ACTION TAKEN ON MEMBERSHIP APPLICATIONS:

With reference to:

A. Applications held over - New information received to up-date applications.

After careful deliberation of up-dated information it was decided that the following applications satisfied criteria which were cited for clarification at the last meeting.

1. American Health Foundation -(Dr. John Weisburger)
New York City

The Committee recommended approval for Special Cancer Center Membership.

2. Cancer Research and Training Program, University of Alabama in
Birmingham -(Dr. John Durant)
Birmingham, Alabama

The Committee recommended approval for Comprehensive Cancer Center Membership.

3. Duke Comprehensive Cancer Center -(Dr. William Shingleton)
Durham, North Carolina

The Committee recommended approval for Comprehensive Cancer Center Membership.

4. Mountain States Tumor Institute -(Dr. C. Ronald Koons)
Boise, Idaho

The Committee recommended approval for Special Cancer Center Membership (under pending revision of By-Laws).

B. Applications held over - No further information received.

1. Tufts Cancer Research Center -(Dr. William H. Fishman)
Boston, Massachusetts

Notified repeatedly to furnish more information to be considered for membership. Has not responded. Deferred.

2. Cancer Research Center of Greater Miami -(Dr. Howard E. Lessner)
Miami, Florida

Notified repeatedly to furnish more information to be considered for membership. Has not responded. Deferred.

C. New applications for membership.

1. Division of Biomedical and Environmental Research (DBER),
United States Atomic Energy Commission -(Dr. James L. Liverman)
Washington, D. C.

In considering this application in terms of the Guidelines: with reference to paragraph 2 - it is not/applicable; with reference to paragraph 3 - the organization represents a contract mechanism for work to be done but the organization identified as the applicant institution is not primarily conducting research as far as we know.

Deferred for further information.

2. Boston University Cancer Research Center -(Dr. Fitzroy Kennedy)
Boston, Massachusetts

Inadequate application. No further information received. The secretary is requested to write for further information concerning application.

Deferred.

3. Cancer Research Center (including Institute of Cancer Research,
Columbia University College of Physicians and Surgeons) -(Dr. Paul A. Marks)
New York City

Further information is required.

December 15, 1973

Deferred for more adequate information regarding administrative status, etc. Most of information comes from a center grant request to NCI.

4. Howard University Cancer Research Center and Freeman's Hospital, Department of Oncology -(Dr. Jack E. White)
Washington, D. C.

Application inadequate; complete application must be filled out.

Deferred for more information.

D. Up-dating of present membership following receipt of new application form application.

1. St. Jude Children's Research Hospital -(Dr. Alvin Mauer)
Memphis, Tennessee

The Committee recommends reaffirmation of approval for Special Cancer Center membership.

Need further information before institution can be recommended for approval as a Comprehensive Cancer Center (see paragraph 4, 9a under guidelines)

2. University of Chicago Cancer Research Center -(Dr. John E. Ultmann)
Chicago, Illinois

The Committee recommends approval for Comprehensive Cancer Center membership.

3. Cancer Research Units, Oak Ridge National Laboratory -(Dr. John R. Totter)
Oak Ridge, Tennessee

The Committee recommends reaffirmation for Special Cancer Center membership.

4. The Children's Cancer Research Foundation, Inc. (including The Charles A. Dana Cancer Center)-(Dr. George E. Foley)
Boston, Massachusetts

The Committee recommends reaffirmation for Comprehensive Cancer Center membership.

5. Fels Research Institute, Temple University School of Medicine -
(Dr. Sidney Weinhouse)
Philadelphia, Pennsylvania

The Committee recommends present status of Special Cancer Center pending revision of status.

Information has been obtained verbally from Temple University that reorganization is being considered.

6. The Institute for Cancer Research (in behalf of The Fox Chase Center for Cancer and Medical Sciences) -(Dr. Timothy R. Talbot)
Fox Chase, Pennsylvania

The Committee recommended approval for Comprehensive Cancer Center membership. They will name delegates from combined institutions.

7. Institute for Medical Research -(Dr. Lewis L. Coriell)
Camden, New Jersey

The Committee recommends reaffirmation for Special Cancer Center membership.

8. McArdle Laboratory for Cancer Research -(Dr. Henry C. Pitot)
Madison, Wisconsin

The Committee recommends reaffirmation for Comprehensive Cancer Center membership.

9. Michigan Cancer Foundation -(Dr. Jerome Horowitz)
Detroit, Michigan

The Committee recommends reaffirmation for Comprehensive Cancer Center membership.

10. Wisconsin Clinical Cancer Center -(Dr. Harold P. Rusch)
Madison, Wisconsin

The Committee noted that the Wisconsin Clinical Cancer Center is an organizational network within a multi-campus university composed of many colleges, each of which is divided into departments. Some of these departments are subdivided into divisions. They further noted that the faculty in these departments participate voluntarily and usually part-time in the WCCC to the extent that their research, teaching or service activities are primarily related to clinical cancer research.

December 15, 1973

They are not employees of the Cancer Center, nor are the specialists, project associates or other staff who assist them in their research. The Center has only four employees, all administrative.

The Committee observed that since the Center is a network of individuals with primary departmental appointments, all administrative and budgetary matters are reviewed by department chairmen and the deans of concerned colleges; and that departments manage their own finances with the exception of Core monies, a small part of the total budget related to clinical cancer activities.

The potential for leadership in developing community programs involving the local medical profession is being planned and other cancer control activities planned, but approval and funding are pending for several aspects.

It was also noted that under research in the application that the plans for research are said to be documented in CA14520-01, CO 615002-01 and are considered confidential documents. Specific queries may be directed to the Director.

The Committee felt that the structure of this organization was such that it would be the wiser course to defer action on this proposal until the membership acts on amendments to go before the membership at its next meeting concerning classes of membership.

11. Roswell Park Memorial Institute -(Dr. Gerald P. Murphy)
Buffalo, New York

The Committee recommends reaffirmation for Comprehensive Cancer Center membership.

12. Cancer Research Center -(Dr. John S. Spratt, Jr.)
Columbia, Missouri

The Committee recommends reaffirmation for Comprehensive Cancer Center membership.

A motion was then made and seconded that recommendations with amendments on membership applications to the AACI be accepted for transmittal to the Membership at its next meeting.

December 15, 1973

These minutes were recorded by Mrs. Jean A. Randall and edited by the undersigned. They are to be submitted to Dr. Edwin A. Mirand, Secretary of the American Association of Cancer Institutes, for final review and/or correction before distribution.

Respectfully submitted,


Murray M. Copeland, M.D.
Chairman
AACI Membership Committee

MMC:jr/wg

Enclosure

December 3, 1973

Dr. Mirand

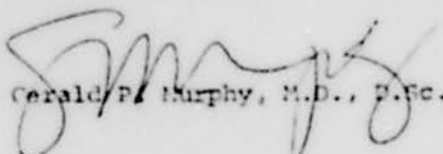
Dr. Murphy

Community Comprehensive Cancer Leaders Centers

There is a center in Boise, Idaho and Berkeleyfield, California that relates to the Fred Hutchinson Center or to the USC Center. I believe H. B. Anderson has also instituted such satellite operations. When your membership committee of the AACIB meets in Houston, Texas, you should consider some means of presenting to the Board a means of implementing or including these people, or at least their directors, as associate members. I think it is highly important.

I also had the opportunity to reaffirm a prejudice with Dr. Clark that we must absolutely move on the positive basis to get all the 12 current comprehensive centers identified by the National Cancer Board and Panel into our Society. This includes Mayo Clinic. Shilly-shallying around, waiting for people to write letters will not do it. We simply cannot afford to have the other groups take over this area. If we don't the deans will be running it quite promptly.

I am sure you will discuss these matters with Dr. Copeland while you are there.


Gerald P. Murphy, M.D., F.Sc.

GPM/cm

cc: Dr. Copeland ✓
Dr. R. Lee Clark



THE UNIVERSITY OF TEXAS AT HOUSTON
M. D. ANDERSON HOSPITAL AND TUMOR INSTITUTE

Texas Medical Center

Houston, Texas

77025

December 20, 1973

OFFICE OF THE PRESIDENT

Dr. Edwin A. Mirand
Roswell Park Memorial Institute
666 Elm Street
Buffalo, New York, 14203

Dear Ed:

Please find attached a copy of the Membership Committee minutes which Mrs. Randall recorded and which were edited by the undersigned. The minutes of the second day's meeting were recorded by Mrs. B. J. Kolenda and will be sent to you via Doctor Clark after his review.

Perhaps the second day's meeting could be identified as that of Implementation Committee rather than the Committee on Membership.

A Merry Christmas and a Happy New Year.

Very sincerely,

Murray
Murray M. Copeland, M.D.
Vice President
The University Cancer Foundation

MM/wg

Enclosure

cc: ✓ Dr. R. Lee Clark
Dr. Timothy R. Talbot

12-14-73

Info

Re: AACI meeting Dec 15-16

Dr. Copeland called to say Dr. Talbot had asked if he could see MDA Med Record dept while here. I have arranged with Bill Shoff to pick up Dr. Talbot at 1401 at Mayfair on Sat Dec. 15 and take him to Med Rec Dept. He will also let Mrs. Norton know in case she wants to be present. Anticipate only about an hour's visit. Dr. Copeland picked the time, since it would be during lunch period and Talbot probably will not want to miss much of AACI meetings.

I have told MMC of this arrangement and gave him Shoff home no. 667-1170 in case plans change in morning.

ml

10.3
See notes

** See notes to
Shoff at 1401*

December 13, 1973

MEMORANDUM TO: All Members of the AACI Membership Committee

SUBJECT: Change in Time of Meeting

The meeting of the Membership Committee of AACI will be held in the Anderson Mayfair, Room 1401, at 8:30 a.m. on Saturday, December 15, 1973.

Murray M. Copeland
Murray M. Copeland, M.D.

MMC:jr

c-Dr. Robert O. Johnson
Dr. William B. Hutchinson
Dr. Edwin A. Mirand
Dr. Timothy Talbot
Dr. Jack Spratt
Dr. Philippe Shubik

*I understood from him that he
won't attend this - but I'd better
y-u on it = him tomorrow.
LWT*

*yes - I'm going to
go to at least some
in*

OFFICE OF THE PRESIDENT

DATE 11/30/73

_____ DR. CLARK	XX _____ MRS. SCHWARTZ
XX _____ MRS. LEON	_____ MRS. WEAVER
XX _____ MRS. LOWREY	_____
_____ MISS RIDER	_____ DR. RAWSON
XX _____ MRS. KOLB	_____ MRS. LUCAS
XX _____ MRS. HALE	_____ MRS. BRANDENBERGER
XX _____ MRS. MCDANIEL	_____ MR. HERREN
XX _____ MRS. NEELLEY	_____ DR. COPELAND

_____ FOR YOUR INFORMATION
_____ SEE ME FOR DISCUSSION
_____ PLEASE HANDLE THIS
_____ FOR YOUR APPROVAL
_____ FOLLOW-UP
_____ FILE
X _____ RETURN TO ME

NOTE:

I showed attached memo to rlc this morning & he said he will not attend (however, said he may stop by on Sunday if mtg has not already broken up.) I have told Mike Kresch.

MEMORANDUM TO THE FILE

November 27, 1973

SUBJECT: AACI Membership Committee Meeting

The following arrangements have been made for the Membership Committee meeting of the AACI, scheduled for December 15 and 16, 1973 in Houston, Texas:

1. I telephoned Dr. Ed Mirand on November 27, 1973 to confirm the above dates for the meeting. Dr. Mirand indicated that the following members and guests would be attending the meeting:

Dr. R. Lee Clark
Dr. Murray M. Copeland
Dr. Ed Mirand
Dr. Timothy Talbot
Dr. John Spratt
Dr. William Hutchinson
Dr. Robert O. Johnson
Dr. Philippe Shubik (not definite)

2. I then telephoned Mr. Kleifgen at the Anderson Mayfair and spoke to his Administrative Assistant, Mrs. Polk, to arrange for room accommodations. Mrs. Polk has guaranteed six (6) single rooms for the nights of December 14 and 15, at a rate of \$18 per night.

3. I also discussed the availability of a conference room at the Mayfair with Mrs. Polk. She informed me that Mr. Weimer, the Resident Manager at the Mayfair, would make all necessary arrangements which are to include the use of Room 1401 (or another appropriate room), a blackboard to be used during the meeting and coffee. Mr. Weimer will telephone me on November 28 to confirm these arrangements.

cc: ✓ R. Lee Clark, M.D.
Murray M. Copeland, M.D.
Ed Mirand, M.D.
Mr. Arthur Kleifgen

G. Michael Kresch
G. Michael Kresch

for Dr. Copeland

FOR INFORMATION:

BJK said that Dr. Talbot called after 5:00 11/26/73 to alert us that the Membership Comm of the AACI has decided to meet (previously Dr. Talbot had wanted the mtg to be 12th & 13th I believe) in Houston on Dec. 15 & 16, a Sat. & Sun. People will be arriving on evening of 14th. BJK said she would call Dr. Copeland to tell him.

--

*Call Wanda Green - MMC out of city
11/27/73 BJK*

I called Dr. Copeland's office & talked with Wanda. I asked her if they wanted the Conf. Rm. here or **did they** plan to use Anderson Mayfair since this is a weekend mtg. She did not know and said

Mike Kresch would be making all of the arrangements.
I will tell rlc upon return.

sw

11/27/73

OFFICE OF THE PRESIDENT

DATE

11/27

DR. CLARK

MRS. SCHWARTZ

4 MR. LEON

8 MRS. WEAVER

7 MRS. LOWREY

MISS RIDER

DR. RAWSON

1 MRS. KOLEND *Do you wish to add anything?*

MRS. LUCAS

2 MRS. HALE

MRS. BRANDENBERGER

5 MRS. McDANIEL

MR. HERREN

3 MRS. NEELLEY

DR. COPELAND

FOR YOUR INFORMATION

SEE ME FOR DISCUSSION

PLEASE HANDLE THIS

FOR YOUR APPROVAL

FOLLOW-UP

FILE

RETURN TO ME

NOTE:

*B/Sure tell
please*

OFFICE OF THE PRESIDENT

DATE 12/2

____ DR. CLARK

____ MR. LEON

____ MRS. LOWREY

____ MISS RIDER

____ MRS. KOLENDA

____ MRS. HALE

____ MRS. MCDANIEL

____ MRS. NEELLEY

____ MRS. SCHWARTZ

☒ ____ MRS. WEAVER

____ DR. RAWSON

____ MRS. LUCAS

____ MRS. BRANDENBERGER

____ MR. HERREN

____ DR. COPELAND

____ FOR YOUR INFORMATION

____ SEE ME FOR DISCUSSION

____ PLEASE HANDLE THIS

____ FOR YOUR APPROVAL

☒ ____ FOLLOW-UP

____ FILE

____ RETURN TO ME

NOTE:

SW - 15-16

FOR INFORMATION:

Dr. Talbot called regarding Dr. Clark's schedule. He talked with Dr. Copeland in Washington yesterday re: having a mtg on the AACI membership committee and also to discuss the contract of the AACI. They are thinking of having a mtg Dec 12 & part of 13 in Houston. He indicated he wanted me to tell MMC that rlc will be in town which I have done. (I told Dr. Talbot actually 13th & 14th would be better for rlc due to Jim Moore's group coming (10-12) but he seemed to favor 12 & 13).

Dr. Talbot will be calling Dr. Clark on Nov. 29 or 30 to discuss above with him.

SW

11/21/73

me
Jim
th
off
LATER: Dr. Copeland called regarding the above meeting and wanted to reserve the large conference room for the Membership Committee of the AACI. He said those attending would be - Robert Johnson, Shubik, Talbot, MMC, and perhaps Spratt. Doctor Copeland said RLC wouldn't want to spend the whole time in there as it will be tedious work, however they wanted him in on the first to give direction. Doctor Copeland said they would meet all day on the 12th and hopefully be through by noon on the 13th. It seems Dr. Talbot has a conflict on the 13th, and perhaps wants to leave early? Doctor Copeland said they would probably want coffee but that Mike would handle that end of it. Doctor Copeland wants a memo to him stating whether or not the conference room is free.

jh

11/21

MS
LATER: Mike Kresh called and said that the above meeting was cancelled to a later date as Dr. Murphy would be away from his institution and it would not be possible for Dr. Mirand to attend this meeting which is important.

jh

11/21

Mtg now scheduled for Dec. 15-16 at
at m.